Fingerprint Card Instructions

Applicant: It is your responsibility to have your Fingerprint Card completed by an authorized fingerprint technician.

If your fingerprint card lacks your full name, date of birth, place of birth, or Social Security Number, it cannot be processed. It is recommended that you take this page to the fingerprint

Notice to Fingerprint Technician

This applicant will furnish you with a fingerprint card. To establish uniform reporting of information of applicant fingerprint cards, the Arizona Massage Therapy Board adheres to the following standard guidelines.

The information must be legible and typed or printed in BLACK ink only.

DO NOT BEND THE FINGERPRINT CARD

VERY IMPORTANT: INCLUDE SOCIAL SECURITY NUMBER. CARDS CANNOT BE PROCESSED WITHOUT THIS INFORMATION.

Completion of Applicant Fingerprint Card

- 1. Applicant's name: Last Name, First Name, Middle Name
- Date of Birth: If unknown, list the approximate age or year of birth
 Place of birth includes only the state or country using authorized coded abbreviations.
- 4. To conform with the ACIC and NCIC Reporting System, the following abbreviations are used for physical identification:
 - a. Race:
 - **i.** A = Asian/Pacific Islander
 - **ii.** B = Black
 - iii. I = Native American/Alaskan Native
 - **iv.** W = White
 - \mathbf{v} . U = Unknown
 - **b.** Height: Use feet & inch measurements: 5'11" for 5 feet 11 inches, not 71 inches
 - c. Weight: Whole numbers only using U.S. pounds
 - d. Eye Color:
 - i. Blk/Black
 - ii. Blu/Blue
 - iii. BRO/Brown
 - iv. GRN/Green
 - v. HAZ/Hazel
 - vi. Mar/Maroon
 - vii. PNK/Pink
 - viii. XXX/Unknown
 - e. Hair color:
 - i. BLK/Black BLN/Blond GRY/Gray ii. BRN/Brown SDY/Sandy iii. RED/Red-Auburn iv. WHI/White XXX/Unknown
- 5. If the FBI or Arizona SID number(s) are known, include them in the specified blocks if applicable